EXECUTIVE LOBBYING EMPLOYER/PRINCIPAL 'S EXPENDITURE REPORT

EMPLOYER/F COVERING JANUARY 1 THROUGH	PRINCIPAL 'S E) FORM 506 FIUNE 30, 2008 - DUE A SH DECEMBER 31,	B NGUST 18		REPORT
Pursuant to LSA-R.S. 49:76G(2)(a), an emprequired by Title 49 on behalf of <u>all</u> of its I exercised this option by timely filing the E of their registered executive lobbyists.	xecutive Lobbying Expanditur	s only to be o	file the Latused by prin Designation	bying Expenditure Reports as cipals or employers who have Form and are reporting on behalf
Hand deliver or mail to: 2415 Quall Drin OR Fax to: (225) 763-8787 or (225) 763-87	ve, 3 rd Floor, Baton Rouge, LA	70B08		
EMPLOYER/PRINCIPAL AstraZeneca BUSINESS ADDRESS 1800 Concord Pike		ton, Delawa		FOR OFFICE USE ONLY Postmark Date: (2 1) C
Street and No.	City	\$tate	Zip	
MAILING ADDRESS Same as above				
Street and No.	City	State	<u>Zip</u> .	
CONTACT PERSON: Fish	Amber		ĸ	3061306
Last	First			
. MAILING ADDRESS_80 South Summit	Street, Suite 100 Akron,	Ohio	44308	
(If different from above) Street and No.	City	State	Zip	
PHONE NUMBER (330) 761-9960				
Ares Code	and Phone Number	_		
. List the names and executive lobbyist regis	tration numbers of the lobbyis	ts on whote	hahalf Hair m	anort la Elical
1) Name: Barnett	Stephanis		В	
Last	First	—	. <u></u> E>	(EC.ID.# 212
2) Name: Barrow	Patricla			
Lest	First	<u> </u>	<u></u> ЕХ	EC.ID.# 211
3) Name: Bauer	Schelbie			247
Lagt	First		<u>^^. </u>	EC.ID.# 217

4) Name: Beatty	Toni		•
L ast	First		EXEC.ID.# 242
o New Bird	•	IMI	
5) Name: Bird	Keith	<u>A.</u>	EXEC.ID.# 271
	First	MI	
6) Name: Blistan	Beth	M.	EXEC.ID.# 230
Last	First	MI	
7) Name: Bonin	Lores	В.	EXEC.ID.# 199
Last	First	MI	ENEC.10.9
8) Name: Braud	Jeffrey	М.	EXEC.ID.# 195
Last	First	M)	EXEC.ID
9) Name: Braun	Amy	N.	
18¢1	First		EXEC.ID.#221
10) Name: Burleigh	Julia		
Last	First	G,	EXEC.ID.# 203
	a eggregate total of all expenditures during the Janua	MI	
 Total of all executive ((Include expenditures 	lobbying expenditures made January 1 through June from Schedules A and Ri	30: s	ee signature page
b. Total of all executive (When Applicable) (I	lobbying expenditures made Jahuary 1 through June from Schedules A and B) lobbying expenditures made July 1 through Decemb notude expanditures from Schedules A and B) obbying expenditures made during calendar year: "b" should equal Line "c")	ovar31: \$	iee skgnature page
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4) Name: Campo	Steven	6.	
Last	Fire	. <u>M.</u> MI	EXEC.ID.# 205
5) Name: Cantrelle	Kevin		0.1-
Last	First	<u>M.</u> 	EXEC.ID.# 315
6) Name: Caplel	David	M.	0.6.7
Last	First		EXEC.ID.# 207
7) Name: Carter	Susan	т.	770
Last	First	— <u>(</u> —	EXEC.ID.# 220
8) Name: Cordell	Misti	S.	- 270
Last	First	<u></u>	EXEC.ID.#_270
8) Name: Cyrus	Kerry	J.	EVEC 1 246
Last	First	MI	EXEC.ID.#_216
10) Name: Damall, Sr.	Robert	C.	EXEC.ID.# 233
Last	First	MI	EXEC.ID.#
c. Total of all executive lobt (Line "a" added to Line "b"	pyling expenditures made July 1 through December 31: ude expenditures from Schedules A and B) byling expenditures made during calendar was:	\$ \$ \$s.	
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i hereby certify tha knowledge, inform: has been deliberate	t the information contained herein is true and co ation and belief; and that no information require ly omitted.	orrect to d by LS	the best of my A-R.S. 49:71 et seq.
	Signature continued on following pages		
	Signature of Employer/Principal or Represen	nterius	-
	Print or Type Full Name	_	-

₽.

Name: Eley, Jr.	James	W.	EXEC.ID.# 234
Last	First	мі	LALO, ID.W.
Name: Finley	Bert	\$.	EXEC.(D.# 214
Last	First		EXEC.ID.F
i) Name: Fowler	Lisa	L.	EXEC.ID.# 235
Lest	First		EXEC.ID.# 200
Name: George	Charles	Ε.	5450 to 200
Last	First		EXEC.ID.#_200
Name: Guerriero	Luke	₩.	
Last	First	<u></u>	EXEC.ID.#_228
Name: Hall	Allison	C.	EVEC 10 - 215
Last	First	MI	EXEC.ID,# 215
0) Name: Hebert	Mark	A.	EXEC.ID.# 210
Lest	First	 MI	EXEC.10,# 210
e principal/employer in a calendar y Total of all executive lobbying exp (Include expenditures from Schedu	penditures made January 1 through June les A and B)	30: 5 See	porting period; (b) the agregate total of all expen
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4) Name: Helmke			
Lasg	First	— R. Mi	EXEC.ID.# 244
5) Name: Hohorst	Ashley		
Lest	First	A	EXEC.10.# 219
6) Name: Hull	·	Mi	
Last		. <u>R.</u>	EXEC.ID.# 243
- Urmphul	First	М	
7) Name <u>; Humphries</u>		_ P	EXEC.ID.# 249
	First	МІ	 -
8) Name: Kleinpeter	Stephen	M.	EXEC.IO.# 225
La y	First	МI	
9) Name; Liles	Jessica	۴.	EXECJD.# 198
Lesk	First	MI	EXEC:10.4 199
10) Nama: Manguno	Rebecca	М.	997
Last	First		EXEC.ID.#_227
c. Total of all executive lob (Line "a" added to Line "l	bbying expenditures made July 1 through December 31 clude expenditures from Schedules A and B) bbying expenditures made during calendar year: b" should equal Line "c") ENT FORM for each of your registered executive tobby	5	·
	CERTIFICATION OF ACCURACY		
i hereby certify th knowledge, inform has been deliberate	at the information contained herain is true and nation and belief; and that no information requi	COMENT to	the best of my A-R.S. 49:71 et seq.
	Signature continued on following pages		
	Signature of Employer/Principal or Repre	Montetiya	-
	Print or Type Full Name		

4) Name: Mayer	Amy	F.	
	First	—·· — '-	EXEC.ID.# 197
5) Name: McAllister	Charles	E.	200
Last	First		EXEC.ID.# 208
6) Name: McCullough	Candace	L ,	201
Last	first		EXEC.ID.# 201
7) Name: McDonald	Michael	J.	- 000
Laert	First	— -— . ". MI	EXEC.ID.# 269
8) Name: Milton	Rebecca	₽.	200
Lett	First	—————— МІ	EXEC.ID.# 229
9) Name: O'Toble Benoit	Keren		
Last	First	- ·	EXEC.ID.#_301
10) Name: Pucketi	Chad	E.	200
Last	First	 Mi	EXEC.ID.#_228
PROVIDE BELOW: (a) the aggregate tot all expenditures during the July 1 - Dece the principal/employer in a calendar yea a. Total of all executive lobbying exper (Include expenditures from Schedules	r. Iditures made January 1 through Jur A and B)	ne 30: <u>\$</u> Sec	gragate total of all expenditures
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4)	Name: Ragusa	Jeri		
	Last	First	—-:_ Мі	EXEC.ID.#_198
5)	Name: Rareshide	Jennifer	1411	EXEC.ID,# 202
	Last	First	МІ	LXEC.10,8
6)	Name:_Rossie	Tracey	\$.	EXEC.ID.∉ 206
	Last	First	М	
7)	Name: Seay	Nicholas	Н.	. EXEC.ID.≢ 314
	Last	First	MI	. CAECHD,
ė)	Name:_Silvio	Jeffrey	D.	EXEC.ID.# 213
	Last	First	MI	EAEG.ID.F
9)	Name; Sins	Amy	c.	EXEC.ID.# 231
	Last	First	MJ .	EXEC.ID.
10)	Name: Smith	Clark	E.	_ EXEC.ID.#_250
	Last	First	MI_	
a. b.	Total of all executive lobby (Include expenditures from : Total of all executive lobby (When Applicable) (Include	ing expenditures made January 1 through June 30: Schedules A and B) ing expenditures made July 7 through December 31: a expenditures from Schedules A and B)		ee signature paga
6.	(Line 'a' added to Line "b' st	ng expenditures made during calendar year: build equal Line "c")	\$	·
B. CON		T FORM for each of your registered executive lobbylst	ts.	
		CERTIFICATION OF ACCURACY		
	I heraby certify that t knowledge, informati has been deliberately	he information contained herein is true and co on and belief; and that no information required omitted.	rrect to d by L!	o the best of my SA-R.S. 49:71 et seq.
		Signature continued on following pages		

Page 7 of 249

Print or Type Full Name

Signature of Employer/Principal or Representative

Form608, Rev. 7/04

4) Name: Solleau	William	L	EVEN 10 - 010
Læst	First	— <u>w</u> i	EXEC.ID.# 218
5) Name:_Spencer	Adriane		Dv
Last	First	MI	EXEC.ID.# 438
6) Name: Tergerson	Michael	Ď.	EVEA 2/11
Lest	First	- 	EXEC.ID.# 241
7) Name; Townson	Jennifer	L.	5750 m + 300
Last	First	MI	EXEC.ID. <u># 209</u>
B) Name: Triplett	David	W.	Standar 994
Last	First	Mi	EXEC.ID.# 224
9) Name: Usie	Kenneth	J.	EVER 10 a 222
Last	First	MI	EXEC.ID.#_223
10) Name: Viator	Lori	L.	EXEC. D.# 222
Last	First	м,	EXEC. D.#_222
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the principal/employer in a cak a. Total of all executive lobby (Include expenditures from: b. Total of all executive lobby (When Applicable) (Include	ing expenditures made January 1 through June 30: Schedulas A and B) ing expenditures made July 1 through December 31: e expenditures from Schedules A and B)	(c) rue a(gregate total of all expendit
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Page 8 of <u>249</u>

Form\$08, Rev. 1/04

4) Name:_Wall	Stephan	_	
Last		<u>Ę.</u> _	EXEC.ID.# 232
5) Name: Zaunbrecher		Mi	
Let	<u>Therese</u>	M	EXEC.ID.# 204
6) Name: Rosenau		MI	·
Last	<u>Samuel</u>	<u>C.</u>	EXEC.ID.# 362
D Name: Schifer	First	М	
7) Name: Schrier	Julis		EXEC.ID.#
	First	Mi	
8) Name: N/A			EVEC 10 a
	First	MI	EXEC.ID.#
9) Name:N/A			5 1
Last	First	- <u>m</u> -	EXEC.ID.#
10) Name: N/A			
Lasc			EXEC.ID.#
Total of all executive lobbying expen	at of all expenditures during the January 1 - i mber 31 reporting period when applicable; i r. iditures made January 1 through June 30;	\$91,	
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COMPLETE AN ATTACHMENT FORM (for each of your registered executive lobbyist	3.	
	CERTIFICATION OF ACCURACY		
	mation contained herein is true and conteller; and that no information required	Tect to t	he best of my
has been deliberately omitted.		1	13:0: 30:71 Pt Sen.

Page 9 of <u>24</u>9

Print or Type Full Name

Adriane Spencer

Signature of Employer/Principal or Representative

EXECUTIVE LOBBYING EMPLOYER/PRINCIPAL 'S EXPENDITURE REPORT ATTACHMENT

This Attachment is to be used to complete from #8 of Form 508, the report form for principals and employers who have elected to report on behalf of their executive lobbyists. Make as many copies of this form as needed for the completion of the expenditure report, [dentity each page with a number and indicate the total number of pages being submitted.

LOBBYIS	Rareshide	Jenni	fer			. EXEC ID#_	202	
	Last	First			MI	. EXCUID#_		
A.	Total of all execu	tive lobbying expenditur (Include expenditures fro	res made Jan m Schedules :	uary 1 thro A and B)	ough June 30:	\$		
	Total of all execu	tive lobbying expenditur (When Applicable) (Incl	res made Jul ude expendib	y 1 through ures from Sc	December 31: hedules A and B	\$_N/A		
	Total of all execut	tive lobbying expenditur (Adding above expenditur	res made dur re lines ahould	ing calend dequal this (ar year: lotal.)	3_1,108.93		
В.	Did this lobbyist	make an expenditure exc	ceeding \$50	on one occ	esion for an ex	ecutive branch offic	cial:	
		suary 1 through June 303 ly 1 through December 3	r 🗹	Yes Yes	☐ No		A	
	If the answer to e	ither question in B above	e is YES, cor	nplete Sche	xiule A and att	ach.		
C.	Did this lobbyist r	make expenditures excee	iding the sur	n of \$250 fa	or an executive	branch official:		
	From January 1 th From July 1 throu	rough June 30? gh December 31?	Yes 🗌 Yes 🔲		No ⊡ No □	NA 2		
	If the answar to e	ither question in C abov	e Is YES, co	mplete Sch	dule A and at	ach.		
D.	Did this lobbyist a executive branch o	experid funds for any rec officials were invited dur	eption, socia ring this rep	il gathering orting peri	, or other func od?	tion to which more	than tw	enty-five
		Yes 🗌	Na	√				
	If the ensurer to D	above is YES, complete	Schedule B	and attach.				5
								- ;

1)

the.	regate total of all expenditures attributable to the department made to orting period; (c) the aggregate total of all expenditures attributable to July 1 - December 31 reporting period when applicable; (d) the aggreyist in a calendar year attributable to the department.	the department made by this lobbyist regate total of all expenditures made t
1)	a. Name of Department Department of Education	
	b. Total of all expenditures made January 1 through June 30:	s 1,108.93
	 Total of all experiditures made July 1 through December 31: (When applicable) 	\$_ ^{N/A}
	 d. Total of all expenditures made during the calendar year; 	<u>\$_1,108.93</u>
Z)	a. Name of Department:	_
	b. Total of all expanditures made January 1 through June 30:	\$
	c. Total of all expenditures made July 1 through December 31: (When applicable)	s
	d. Total of all expenditures made during the calendar year:	\$ ^{0.00}
3)	a. Name of Department: N/A	_
	b. Total of all expenditures made January 1 through June 30:	\$ <u></u>
	 Total of all expenditures made July 1 through December 31: (When applicable) 	\$
	d. Total of all expenditures made during the calendar year:	\$_0.00
9	s. Name of Department; N/A	
	b. Total of all expenditures made January 1 through June 30:	\$
	 Total of all expenditures made July 1 through December 31: (When applicable) 	*
	d. Total of all expenditures made during the calendar year:	\$ 0.00

E.

opo Geol	OVIDE BELOW (a) the name of the executive branch department are not schedule; (b) the aggregate total of all expenditures attributable toward 1 - June 30 reporting period; (c) the aggregate total of all expend by the found of the supporting period when applicate by this lobbylst in a calendar year attributable to the agency.	o the agency made by this lobbyist during the
1}	a. Name of Department and Individual Agency: Department	of Education,
	Medical Center of Louisiana at New Orleans	
	b. Total of all expenditures made January 1 through June 30;	\$ 874.96
	 Total of all expanditures made July 1 through December 31: (When applicable) 	\$_ ^{N/A}
	d. Total of all expenditures made during the calendar year:	\$ <u></u>
2)	4J	of Education,
	Earl K. Long Medical Center	
	b. Total of all expenditures made January 1 through June 30:	\$_109.37
	 Total of all expenditures made July 1 through December 31: (When applicable) 	\$ <u>N/A</u>
	d. Total of all expenditures made during the calendar year:	<u>s_109.37</u>
3}	a. Name of Department and Individual Agency: Department of	f Education,
	Louislana State University Health Sciences Center	
	b. Total of all expenditures made January 1 through June 30:	s 124,60
	 Total of all expenditures made July 1 through December 31: (When applicable) 	<u>\$_N/A</u>
	d. Total of all expenditures made during the calendar year:	<u>\$124.80</u>
4)	a. Name of Department and Individual Agency: N/A	- — — -
	b. Total of all expanditures made January 1 through June 30:	
	 Total of all expenditures made July 1 through December 31: (When applicable) 	s
Form 508, Rev. 7	d. Total of all expenditures made during the calendar year: (04 Page 131 of 249	\$_ 0.00

Executive Lobbyist:	Rareshide	Jennifer		F 1
	Last	First	MI	Exec. ld #: 202

SCHEDULE A: EXPENDITURES FOR EXECUTIVE BRANCH OFFICIALS

This schedule must be completed if, during the period lanuary 1 through June 30 or the period July 1 through December 31, one of your registered executive lobbylists made either a) an expenditure for any executive brench official exceeding \$250 on any one occasion or b) aggregate expenditures exceeding \$250 for any one executive branch official during a reporting period, thou you must provide the name of the lobbylist who made the expenditure(s) and the aggregate total of expenditures made on that individual in that reporting period. Make as many copies as are necessary. Each lobbylist should have his own Schedule A If one is required, NOTE: Report covering July - December 15 cumulative. You must include reportable

1. EXECUTIVE OFFICIAL'S NAME	2. DFF/CIAL'S AGENCY AS LISTED IN THE EXECUTIVE BRANCH SCHEDULE	J. AMOUNT OF EXPENDITURES MADE DN AN OFFICIAL FOR WHOM YOU FITHER SPENT OVER \$40 ON ONE DOCASION OR MADE EXPENDITURES EXCEEDING \$250 BETWEEN JANUARY 1 AND JUNE 30	4. AMOUNT OF EXPENDITURES MADE ON AN OFFICIAL FOR WHOM YOU EITHER SPENT OVER \$50 ON ONE OCCASION OR MADE EXPENDITURES EXCEEDING \$250 BETWEEN JULY 1 AND DECEMBER \$1	5. TOTAL OF COLUMNS 3 AND 4
Mary Jo Broussard	Medical Center of Louisiana at New Orleans	\$109.37	- -	\$109.37
Clara Crockett	Earl K. Long Medical Center	\$109.37		\$109.37
Gayle Fertitta	Medical Center of Louisiana at New Orleans	\$109.37		\$109.37
Francis Hawkins	Medical Center of Louisiana at New Orleans	\$109.37		\$109,37
Pat Keebert	Medical Center of Louisiana at New Orleans	\$109.37		\$109.37j
Mary Noel	Medical Center of Louisiana at New Orleans	\$109.37		
Pramilia Subramaniam	Louisiana State University Health Sciences Center	\$124.60		\$124.60
Parlene Waldweiler	Medical Center of Louisiana at New Orleans	\$109.37		\$109.37
hillip Weiss	Medical Center of Louisians at New Orleans	\$109.37		\$109.37

Executive Lobbyist:		r	Exec. Id #; ²⁰²		
- 	≄nt Firsa		M)		
SCHEDULE A	A: EXPENDITURES	FOR EXECUTIV	/F RPANCH OF		
executive lobbylsts made either exceeding \$250 for any one ox expenditure(s) and the apprena	ed if, during the period January 1 thm a) an expenditure for any executive to acutive branch official during a reprint a total of expanditures made on that in Pedule A if one is required. NOTE on	ough June 30 or the period) pranch official exceeding \$50 orting period, then you mus	taly 1 through December 3 0 an any one occasion or b 10 provide the name of the	1, one of your registorer aggregate expenditure	
1. EXECUTIVE OFFICIAL'S NAME	2. OFFICIAL'S AGENCY AS LISTED IN THE EXECUTIVE BRANCH SCHEDULE	3. AMOUNT OF EXPENDITURES MADE ON AN OFFICIAL FOR WHOM YOU EITHER SPENT OVER \$50 ON ONE OCCASION OR MADE EXPENDITURES EXCEDING \$250 BETWEEN LANUARY 1 AND MANE 30	♣. AMOUNT OF FXPENDITURES MADE ON AN OFFICIAL FOR WHOM YOU EITHER SPENT OVER 350 ON ONE OCCASION OR MADE EXPENDITURES EXCEEDING \$250 BETWEEN JULY 1 AND DEGEMBER 11	5. TOTAL OF COLUMNS 3 AND 4	
arbara Williams	Medical Center of Louisiana at New Orleans	\$109,37		\$109.37	
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